

**For Office Use**

Date: ____ / ____ / ____

Payment Method _____

Comment: _____

***Important:** You will be enrolled only when we receive this registration form and payment.
Please refer to the 4 Easy Ways to Register for details.

Class Registration Form

Participant

Last Name _____ First Name _____

Address _____
Street City State Zip Code

Day Phone (_____) _____ Night Phone (_____) _____

Age (if under 18) _____ First Time Student? ☐ Yes ☐ No

Parent /Guardian

Name _____ Phone (_____) _____

Courses

CLASS NAME	Group	Fee
1.		
2.		
3.		
	Total:	

RELEASE AND WAIVER

I /We the undersigned parent or guardian(s) of a minor / an individual _____, do hereby consent to his/her/my participation in activities located at or in the City of Chelsea Community Schools ("CCS") and do forever RELEASE, acquit, discharge, and covenant to hold harmless the City of Chelsea, a Massachusetts municipal corporation, and its officers, employees, consultants, and agents (collectively the "City"), of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damage which I /we may now or hereafter have as the parent(s) or guardian(s) of said minor/an individual, and also all claims or right of action for damages which said minor/ myself has or hereafter may result from his/her/my participation in the CCS' activities; this consent includes allowing said participant to be photographed by the City during CCS programs and for those photographs and video images to be used for all promotional and media purposes for CCS.

FURTHERMORE, I /we hereby agree to protect the City and its successors, departments, officers, employees, consultants and agents against any claim for damages, compensation or otherwise on the part of said minor/myself growing out of or resulting from injury to said minor /myself in connection with his/her/my participation in the activities at the Williams School, and to INDEMNIFY, reimburse or make good to the City or its successors, departments, officers, employees, consultants and agents any loss or damage to costs, including attorney's fees, the City or its representatives may have to pay of any litigation arise from said minor's intentional or my intentional negligent, or reckless acts or omissions while participating in CCS activities.

Adult Participant_____
Date_____
Signature of Parent/Guardian must sign for children under 18 yrs_____
Date